Healthwatch Wolverhampton (HWW) Oversight Group Summary Notes

Date: 30 June 2025

This meeting had a public session with one member of the public attending.

Attendees: Mandy Poonia (Co-Chair), Suffia Perveen (Co-Chair), Stacey Lewis (staff), Harrianne Cresswell (staff), Luke Guy (staff), Andrea Cantrill (staff), Rachel Prince (City of Wolverhampton Council), Grace Kaplan (RMC), Aeon Anderson (ACCI) David Hellier (Castle Croft PPG), Dedrie Maguire (Zebra Access), Danny (Gatis Street Community Centre), Ade Ileladewa (Black Country Healthcare Foundation Trust)

Guest Speaker- Craig Pothecary from Sandwell Deaf Community Association (SDCA)

Closed panel meeting

Welcome, apologies and conflict of interest

Apologies: Jenny Lees (City of Wolverhampton Council Library), Nick Barlow (Wolverhampton LGBT+), Wayne and Cassie Edge(P3), Neena (SNJ Charitable Trust) Helen Webb (staff)

Unknown: Evelyn Brown (Wolverhampton Housing) Hannah Ackom-Mensah (BCHFT-Community Connexions Lead)

Conflicts of interest

None.

Minutes of last meeting

Read and approved

Matters Arising

The chair informed the members of the release of the Dash report which happened 3 days ago and the outcomes for Healthwatch. A statement was read out that summarised the implications for Healthwatch. It said, **The Government has published the Dash review, which recommends:**

1. Transferring the functions of Healthwatch England to the Department of Health, and

2. Transferring the functions of local Healthwatch into Integrated Care Boards and local authorities.

The Government has said that it accepts this recommendation and will pass legislation to enable it when time allows. This means that, until legislation is passed, the Department of Health and Social Care will advise local authorities to continue commissioning local Healthwatch services. In the meantime, we will continue to gather,

analyse, and communicate people's care experiences and provide advice and information. Following this discussion members expressed their views and concerns and wanted it noting that they are concerned about the potential to lose the mechanism for independent patient voice.

Healthwatch Wolverhampton Update Report

Full information shared in advance with members-in summary:

Feedback from the public-During this quarter, most feedback from the public has been of a negative sentiment with 94% of the information reporting negative feedback around access to services, booking appointments & quality of treatment. *Between January – June 2025, we received 37 pieces of feedback*.

42% of the information collected involved Hospital services.

42% of the information collected involved GP services.

8% of the information collected involved Care homes.

HWW released a report on people's experience on mental health with a positive stakeholder response showing how they will respond to our recommendations. **https://www.healthwatchwolverhampton.co.uk/report/2025-04-30/peoples-experiences-mental-health-services-wolverhampton**

Key Performance Indicators -HWW is meeting its Key Performance Indicators for engagement. Wider community engagement included visits to:

Mental health events for Punjabi men, Wolverhampton University, Bilston breakfast club, homeless groups, Pendeford health centre, Cancer events and the Job Centre.

Enter and View visit took place 26 March, and report will be available on the HWW website.

Members updates

CWC (Housing-represented by Rachele) – update from public health- they have a consultation recommissioning services for domestic abuse, want to promote and engage with as many groups as possible.

Castlecroft PPG – reflected on trends in recruitment in health services which seems to be leaning to family care and the government favouring those going to medical school from Britain rather than aboard. David is concerned about resources, many GPs at Castlecroft are part time, if they are going to move patient care to the community this will impact on this, so it is important the ambitions match the manpower. Another reflection to the group was how cancer services will be improved as part of the NHS 10 year plan. David also shared a personal experience of not been able to get an ambulance for his wife in an emergency situation and then further experiencing a long wait at A&E with poor care.

Gatis Street- informed the group of their upcoming 10-year party, planned for the community. There will be games and food. The party will be an opportunity to gain feedback to see where they go for the next 10 years.

ACCI- Reported on the completion of a video launched at the grand theatre aimed to give an insight to people's experience with mental health. ACCI have been nominated for an award from an organisation in America where the winner and runners up will get a large sum of money. However, on the other hand the Black Country Healthcare Foundation Trust have stopped a large amount of funding so they are in a very precarious position. HWW have recommend in their mental health report that more funding should go into voluntary sector as our report showed that people received quicker support and good care through services such as ACCI. Aeon reported that their own cost calculation shows that a funding to ACCI of £500 to look after a person is comparative to £3 million if the same person goes into acute care, and a cost of £900 a week to house someone with them is £500 a day to support someone at Penn hospital.

RMC- Clients still struggling with finding work after been granted refugee status. They also struggle with getting universal credit as many do not have competent digital skills which is leading to further financial problems in their lives. Mandy Poonia explained that digital inequalities remains a problem and that it is also a problem in healthcare. Grace confirmed this, stating that some people are not seeing health professionals, one client hasn't seen a dentist since before covid, as he couldn't read and write, so went without, until he came to RMC. SL made an offer to support with HWW volunteers who could be trained to help, especially those who don't speak English. Grace updated that there are also challenging issues with accommodation for men in particular, refuges are given 28 days to leave home office accommodation and often have nowhere to go. Some are looking to Birmingham or turning to the streets due to lack of support and availability. Newly arrived asylum seekers can't get a SIM card so can't call for an ambulance, even if they knew how, and then can't speak the language. Dental appointments still a problem and lack of English, has led to some getting penalty charges for things like littering as they do not understand the rules. This is further impacting on mental health as paying fines leave them without money to get food.

Zebra Access- Deidre has been having various meetings with ICB and is reinforcing to them that an alternative to digital is just as important, to prevent perpetuating the inequalities they are seeking to eliminate. People that are digitally competent now may not be later on, for example if they develop dementia or develop a physical impairment.

EMC- reported back on needs of community organisation, Suffia often supports up to 50 organisations and whilst many of these groups are very humble and get on with it, they need more support in marketing. Suffia is thinking of codesigning something to go on the shelf around lack of funding.

Volunteering Update

We have 52 volunteers giving 112.5 hours this quarter. Outcomes for volunteers include access to training such as mental health first aid and trauma informed practice. The chairs have been representing Healthwatch at meetings such as the Health and wellbeing board, a round table event with MPs and other stakeholders and Health Scrutiny. We supported One Wolverhampton with a WEX placement and recognised volunteers with a celebration event during volunteers week in June.

Public session

Annual report presented and opportunity for Q&A. No question was submitted by the public.

Group Insight, local issues and AOB

The discussions mainly consisted of:

- Future of HW
- Voluntary sector funding challenges

Meeting close

The Chair and Manager thanked everyone for attending and their contributions to a good discussion.

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